

BIRTHS

BERLIN CITY CLERK
168 MAIN STREET
BERLIN, NH 03570

NUMBER: _____

REQUESTED: _____

ISSUED: _____

APPLICATION FOR COPY OF BIRTH CERTIFICATE

NAME
AT BIRTH _____
FIRST MIDDLE LAST

DATE OF BIRTH _____ PLACE OF BIRTH _____
MONTH DAY YEAR

FATHER'S
NAME _____
FIRST LAST

MOTHER'S
MAIDEN NAME _____
FIRST LAST

PURPOSE FOR WHICH CERTIFICATE IS REQUESTED? _____ LIC# OR NON-DRIVER ID# _____

YOUR SIGNATURE: _____ YOUR RELATIONSHIP TO REGISTRANT? _____

A FEE OF \$12.00 IS REQUIRED BY LAW FOR THE SEARCH OF THE FILE FOR ANY ONE RECORD.
A FEE OF \$8.00 IS REQUIRED BY LAW FOR EACH SUBSEQUENT COPY ISSUED AT THE SAME TIME AS THE INITIAL COPY.
NOTICE: ANY PERSON SHALL BE GUILTY OF A CLASS B FELONY IF HE/SHE WILLFULLY AND KNOWINGLY
MAKES ANY FALSE STATEMENT IN AN APPLICATION FOR A CERTIFIED COPY OF A VITAL RECORD (RSA 126:24)